



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

CANDIDATE COMMITTEE
COVER PAGE

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

1. Committee I.D. Number 96895		3. This Statement covers From: 03/18/22 to 07/17/22	
2. Committee Name Committee to Elect Sylvia Rhodea		4. Candidate Last Name Rhodea First Name Sylvia M.I. 4a. Office Sought Including District # or Community Served (If applicable) County Commissioner District 8 4b. County of Residence Ottawa	
5. Committee's Mailing Address PO Box 354 Allendale MI 49401 Area Code and Phone (616) 307-7399 If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.		6. Treasurer's Name & Residential Address Sylvia Rhodea 12482 60th Ave Allendale MI 49401 Area Code & Phone (616) 307-7399	
7. Treasurer's Business Address 12482 60th Ave Allendale MI 49401 Area Code and Phone (616) 307-7399		8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper) Area Code and Phone _____	
9. TYPE OF STATEMENT 9a. <input checked="" type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election Pre-Election or Post-Election Statement relates to: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> Special <input type="checkbox"/> School <input type="checkbox"/> Caucus Date of Election, Convention or Caucus 08/02/22		Required ONLY if candidate is not on the ballot <input type="checkbox"/> July Quarterly <input type="checkbox"/> October Quarterly 9c. <input type="checkbox"/> Annual Statement (_____) Coverage Year 9d. <input type="checkbox"/> _____ amended Effective date of dissolution _____ Note: The disposition of residual funds must be reported on U&S-A-B and the Summary Page.	
10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.			
Current Treasurer or Designated Record keeper _____ Type or Print Name		Signature _____ Date _____	
Candidate _____ Type or Print Name		Signature _____ Date _____	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 96895

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name Committee to Elect Sylvia Rhodea

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>\$15,539.51</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>\$15,539.51</u>	(18.) \$ <u>\$15,539.51</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>\$0.00</u>	(19.) \$ <u>\$0.00</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>\$15,539.51</u>	(20.) \$ <u>\$15,539.51</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>\$7,982.33</u>	(21.) \$ <u>\$7,982.33</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>\$0.00</u>	(22.) \$ <u>\$0.00</u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>\$11,325.34</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>\$0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>\$0.00</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>\$11,325.34</u>	(23.) \$ <u>\$11,325.34</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>\$0.00</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>\$0.00</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ <u>\$0.00</u>	(24.) \$ <u>\$0.00</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>\$0.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>\$0.00</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>\$0.00</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>\$15,539.51</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>\$15,539.51</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>\$11,325.34</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>\$4,214.17</u>	*



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number 96895
2. Committee Name Committee to Elect Sylvia Rhodea

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/22/2022</u> Name & Address: Joseph Moss 6753 Bradenwood Drive Hudsonville MI 49426		\$ <u>\$1,050.00</u>	\$ <u>\$1,050.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CFO</u> Employer <u>Freshphone, Inc.</u> Business Address <u>517 Baldwin Street Jenison MI 49428</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/22/2022</u> Name & Address: Sylvia Rhodea 12482 60th Ave. Allendale MI 49401		\$ <u>\$1,000.00</u>	\$ <u>\$1,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Homemaker</u> Employer <u>Homemaker</u> Business Address <u>12482 60th Ave. Allendale MI 49401</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>04/19/2022</u> Name & Address: Joseph Moss 6753 Bradenwood Drive Hudsonville MI 49426		\$ <u>\$5.00</u>	\$ <u>\$5.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CFO</u> Employer <u>Freshphone, Inc.</u> Business Address <u>517 Baldwin Street Jenison MI 49428</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>04/19/2022</u> Name & Address: Sylvia Rhodea 12482 60th Ave. Allendale MI 49401		\$ <u>\$5.00</u>	\$ <u>\$1,005.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Homemaker</u> Employer <u>Homemaker</u> Business Address <u>12482 60th Ave. Allendale MI 49401</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal **\$2,060.00**

Grand Total of All Schedules 1A
(Complete on last page of Schedule) **\$15,539.51**

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number 96895
2. Committee Name Committee to Elect Sylvia Rhodea

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>04/21/2022</u> Name & Address: Candy Kraker 7564 Watermark Drive Allendale MI 49401		\$ <u>\$104.10</u>	\$ <u>\$104.10</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>retired</u> Business Address <u>7564 Watermark Drive Allendale MI 49401</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>04/30/2022</u> Name & Address: Bill Luurtsema 485 Stonehenge Dr SE Grandville MI 49418		\$ <u>\$100.00</u>	\$ <u>\$100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>05/06/2022</u> Name & Address: Laura Potgeter 9367 Shady Creek Lane Allendale MI 49401		\$ <u>\$52.05</u>	\$ <u>\$52.05</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>hairstylist</u> Employer <u>self</u> Business Address <u>9367 Shady Creek Lane Allendale MI 49401</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>05/11/2022</u> Name & Address: Lanae Monera 6722 Pierce street Allendale MI 49401		\$ <u>\$208.20</u>	\$ <u>\$208.20</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Plunkett Cooney</u> Business Address <u>333 Bridge street Grand Rapids MI 49504</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal **\$464.35**

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

\$15,539.51

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number 96895
2. Committee Name Committee to Elect Sylvia Rhodea

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>05/26/2022</u>	
Name & Address: Ottawa Impact Education PAC PO Box 802 Jenison MI 49429		\$ <u>\$4,500.00</u>	\$ <u>\$4,500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PAC</u> Employer <u>PAC</u> Business Address <u>PO Box 802 Jenison MI 49429</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>05/28/2022</u>	
Name & Address: Ronaldyn Allen 11024 Timberline Allendale MI 49401		\$ <u>\$40.00</u>	\$ <u>\$40.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>05/28/2022</u>	
Name & Address: Amber Ciesielski 6524 Elwood Ct. S Allendale MI 49401		\$ <u>\$50.00</u>	\$ <u>\$50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>05/29/2022</u>	
Name & Address: Anna Hendricks 12336 White Pine Dr Allendale MI 49401		\$ <u>\$260.25</u>	\$ <u>\$260.25</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Homemaker</u> Employer <u>Homemaker</u> Business Address <u>12336 White Pine Dr Allendale MI 49401</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal **\$4,850.25**

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

\$15,539.51

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number 96895
2. Committee Name Committee to Elect Sylvia Rhodea

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>05/30/2022</u> Name & Address: Therese Degraaf 6184 Balcom lane Allendale MI 49401		\$ <u>\$10.00</u>	\$ <u>\$10.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/02/2022</u> Name & Address: Therese Degraaf 6184 Balcom lane Allendale MI 49401		\$ <u>\$10.00</u>	\$ <u>\$20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/02/2022</u> Name & Address: Stephen Wolbrink 6160 lincoln Allendale MI 49401		\$ <u>\$26.03</u>	\$ <u>\$26.03</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/03/2022</u> Name & Address: Bryan Betten 2805 Judson Rd Spring Lake MI 49452		\$ <u>\$950.00</u>	\$ <u>\$950.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Betten Baker Automotive Group</u> Business Address <u>2474 Henry St Muskegon MI 49441</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal **\$996.03**

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

\$15,539.51

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number 96895
2. Committee Name Committee to Elect Sylvia Rhodea

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/03/2022</u> Name & Address: Sandra Betten 2805 Judson Rd Spring Lake MI 49452		\$ <u>\$1,050.00</u>	\$ <u>\$1,050.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Homemaker</u> Employer <u>Homemaker</u> Business Address <u>2805 Judson Rd Spring Lake MI 49452</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/03/2022</u> Name & Address: Denice Belknap 15325 Cove Street Grand Haven MI 49417		\$ <u>\$100.00</u>	\$ <u>\$100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/06/2022</u> Name & Address: Laura Potgeter 9367 Shady Creek Lane Allendale MI 49401		\$ <u>\$52.05</u>	\$ <u>\$52.05</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>hairstylist</u> Employer <u>self</u> Business Address <u>9367 Shady Creek Lane Allendale MI 49401</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>06/10/2022</u> Name & Address: TGIF Victory Fund 1701 PORTER SW Wyoming MI 49519		\$ <u>\$4,000.00</u>	\$ <u>\$4,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PAC</u> Employer <u>PAC</u> Business Address <u>1701 PORTER SW Wyoming MI 49519</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal **\$5,202.05**

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

\$15,539.51

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number 96895
2. Committee Name Committee to Elect Sylvia Rhodea

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/10/2022</u> Name & Address: Thomas McMillin 4096 Bold Meadows Oakland Township MI 48306		\$ <u>\$50.00</u>	\$ <u>\$50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/10/2022</u> Name & Address: Jeremiah Meekhof 11670 78th Allendale MI 49401		\$ <u>\$100.00</u>	\$ <u>\$100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/10/2022</u> Name & Address: Tyler Van Dyken 6536 Henry St. Allendale MI 49401		\$ <u>\$26.03</u>	\$ <u>\$26.03</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/21/2022</u> Name & Address: Angela Loreth 10950 Jordan Ct Allendale MI 49401		\$ <u>\$104.10</u>	\$ <u>\$104.10</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Business Owner</u> Employer <u>Solid Rock Childcare</u> Business Address <u>5692 School Ave Hudsonville MI 49426</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal **\$280.13**

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

\$15,539.51

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number 96895
2. Committee Name Committee to Elect Sylvia Rhodea

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/22/2022</u> Name & Address: Gail Roelofs 10146 64 Avenue ALLENDALE MI 49401		\$ <u>\$52.05</u>	\$ <u>\$52.05</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/23/2022</u> Name & Address: Dawn Brumels 11805 Andrews Ave Allendale MI 49401		\$ <u>\$104.10</u>	\$ <u>\$104.10</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>admin</u> Employer <u>The CPA Group</u> Business Address <u>4266 Canal Grandville MI 49418</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/26/2022</u> Name & Address: Carol Modderman 9405 S. Cedar Dr. Allendale MI 49401		\$ <u>\$104.10</u>	\$ <u>\$104.10</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>retired</u> Business Address <u>9405 S. Cedar Dr. Allendale MI 49401</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/26/2022</u> Name & Address: Krista Yetzke 9509 Bass Drive Allendale MI 49401		\$ <u>\$104.10</u>	\$ <u>\$104.10</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Sourcer</u> Employer <u>Palladian West</u> Business Address <u>124 Fulton Street East Grand Rapids MI 49503</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal **\$364.35**

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

\$15,539.51

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number 96895
2. Committee Name Committee to Elect Sylvia Rhodea

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Rachel Atwood 8978 Bosworth Dr Jenison MI 49428	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/26/2022</u>	\$ <u>\$10.41</u>	\$ <u>\$10.41</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2 Name & Address: Kristen Meghan Kelly 4522 Equestrian Drive Hudsonville MI 49426	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/26/2022</u>	\$ <u>\$26.03</u>	\$ <u>\$26.03</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 Name & Address: Connie Eardley 6839 Kenowa Ave SW Grandville MI 49418	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/27/2022</u>	\$ <u>\$26.03</u>	\$ <u>\$26.03</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 Name & Address: Steve Zatarga 9888 56th ave Allendale MI 49401	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/28/2022</u>	\$ <u>\$208.20</u>	\$ <u>\$208.20</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Commercial construction</u> Employer <u>Self employed</u> Business Address <u>9888 56th ave Allendale MI 49401</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal **\$270.67**

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

\$15,539.51

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number 96895
2. Committee Name Committee to Elect Sylvia Rhodea

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Lynnae Haveman 10930 56th Avenue Allendale MI 49401	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/28/2022</u>	\$ <u>\$26.03</u>	\$ <u>\$26.03</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2 Name & Address: Angie Yetzke 8367 Stonington Jenison MI 49428	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/28/2022</u>	\$ <u>\$26.03</u>	\$ <u>\$26.03</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 Name & Address: Therese Degraaf 6184 Balcom lane Allendale MI 49401	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/29/2022</u>	\$ <u>\$25.00</u>	\$ <u>\$25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 Name & Address: Barb Vander Veen 6185 Alger St. Allendale MI 49401	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/29/2022</u>	\$ <u>\$50.00</u>	\$ <u>\$50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal **\$127.06**

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

\$15,539.51

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number 96895
2. Committee Name Committee to Elect Sylvia Rhodea

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/01/2022</u> Name & Address: Jared Schuitema 6163 Alger St Allendale MI 49401		\$ <u>\$520.51</u>	\$ <u>\$520.51</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Realtor</u> Employer <u>Self</u> Business Address <u>6163 Alger St Allendale MI 49401</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/12/2022</u> Name & Address: Kristen Augustyn 10914 Woodedge Drive Allendale MI 49401		\$ <u>\$26.03</u>	\$ <u>\$26.03</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/06/2022</u> Name & Address: Laura Potgeter 9367 Shady Creek Lane Allendale MI 49401		\$ <u>\$52.05</u>	\$ <u>\$156.15</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>hairstylist</u> Employer <u>self</u> Business Address <u>9367 Shady Creek Lane Allendale MI 49401</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/14/2022</u> Name & Address: Tyler Van Dyken 6536 Henry St. Allendale MI 49401		\$ <u>\$26.03</u>	\$ <u>\$26.03</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal **\$624.62**

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

\$15,539.51

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number 96895
2. Committee Name Committee to Elect Sylvia Rhodea

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/16/2022</u>	
Name & Address: Lanae Monera 6722 Pierce street Allendale MI 49401		\$ <u>100.00</u>	\$ <u>308.20</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Plunkett Cooney</u> Business Address <u>333 Bridge street Grand Rapids MI 49504</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/16/2022</u>	
Name & Address: Rita VanderMeulen 12134 60th Ave. Allendale MI 49401		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>retired</u> Business Address <u>12134 60th Ave. Allendale MI 49401</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt _____	
Name & Address: 		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt _____	
Name & Address: 		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal **\$300.00**

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

\$15,539.51

Enter this total on
line 3a of Summary
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ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 96895

CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Sylvia Rhodea

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? <input checked="" type="checkbox"/> Yes Name & Address: Ottawa Impact PAC PO Box 802 Jenison MI 49429 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Website</u> 5. Date Of Receipt: <u>04/13/2022</u> 6. Vendor Name & Address: For Liberty LLC 517 Baldwin Street Jenison MI, 49428	\$ \$100.00	\$ \$100.00
<input type="checkbox"/> Fund Raiser Contribution			
Contribution # 2 PAC Receipt? <input checked="" type="checkbox"/> Yes Name & Address: Ottawa Impact PAC PO Box 803 Jenison MI 49430 If over \$100.00 cumulative, please provide: Occupation: <u>PAC</u> Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Graphics</u> 5. Date Of Receipt: <u>05/01/2022</u> 6. Vendor Name & Address: For Liberty LLC 517 Baldwin Street Jenison MI, 49428	\$ \$500.00	\$ \$600.00
<input type="checkbox"/> Fund Raiser Contribution			
Contribution #3 PAC Receipt? <input checked="" type="checkbox"/> Yes Name & Address: Ottawa Impact PAC PO Box 804 Jenison MI 49431 If over \$100.00 cumulative, please provide: Occupation: <u>PAC</u> Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Billboard</u> 5. Date Of Receipt: <u>05/25/2022</u> 6. Vendor Name & Address: OUTFRONT Media 1355 Century Avenue S.W. Grand Rapids MI, 49503	\$ \$1,000.00	\$ \$1,600.00
<input type="checkbox"/> Fund Raiser Contribution			

Page Subtotal \$1,600.00

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule) \$7,982.33

Enter this total
on line 6 of Summary
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ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 96895

CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Sylvia Rhodea

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? <input checked="" type="checkbox"/> Yes Name & Address: Ottawa Impact PAC PO Box 805 Jenison MI 49432 If over \$100.00 cumulative, please provide: Occupation: PAC Employer Name & Business Address: PAC PO Box 805 Jenison MI, 49429 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Shirts</u> 5. Date Of Receipt: <u>05/31/2022</u> 6. Vendor Name & Address: WM Apparel 407 W 17th Street Holland MI, 49423	\$ 1,683.53	\$ 3,283.53
Contribution # 2 PAC Receipt? <input checked="" type="checkbox"/> Yes Name & Address: Ottawa Impact PAC PO Box 806 Jenison MI 49433 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Web Hosting</u> 5. Date Of Receipt: <u>06/01/2022</u> 6. Vendor Name & Address: For Liberty LLC 517 Baldwin Street Jenison MI, 49428	\$ 42.87	\$ 3,326.40
Contribution #3 PAC Receipt? <input checked="" type="checkbox"/> Yes Name & Address: Ottawa Impact PAC PO Box 807 Jenison MI 49434 If over \$100.00 cumulative, please provide: Occupation: PAC Employer Name & Address: PAC PO Box 807 Jenison MI, 49434 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Signs</u> 5. Date Of Receipt: <u>06/03/2022</u> 6. Vendor Name & Address: Source One Digital 3044 Glade Street Muskegon MI, 49444	\$ 2,086.98	\$ 5,413.38

Page Subtotal \$3,813.38

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule) \$7,982.33

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on line 6 of Summary
Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 96895

CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Sylvia Rhodea

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? <input checked="" type="checkbox"/> Yes Name & Address: Ottawa Impact PAC PO Box 808 Jenison MI 49435 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Printed Marketing Material</u> 5. Date Of Receipt: <u>06/03/2022</u> 6. Vendor Name & Address: Holland Litho 10972 Chicago Dr Zeeland MI, 49464	\$ \$51.71	\$ \$5,465.09
<input type="checkbox"/> Fund Raiser Contribution			
Contribution # 2 PAC Receipt? <input checked="" type="checkbox"/> Yes Name & Address: Ottawa Impact PAC PO Box 809 Jenison MI 49436 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Printed Marketing Material</u> 5. Date Of Receipt: <u>06/03/2022</u> 6. Vendor Name & Address: Holland Litho 10972 Chicago Dr Zeeland MI, 49464	\$ \$52.07	\$ \$5,517.16
<input type="checkbox"/> Fund Raiser Contribution			
Contribution #3 PAC Receipt? <input checked="" type="checkbox"/> Yes Name & Address: Ottawa Impact PAC PO Box 810 Jenison MI 49437 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Printed Marketing Material</u> 5. Date Of Receipt: <u>06/03/2022</u> 6. Vendor Name & Address: Holland Litho 10972 Chicago Dr Zeeland MI, 49464	\$ \$83.27	\$ \$5,600.43
<input type="checkbox"/> Fund Raiser Contribution			

Page Subtotal \$187.05

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule) \$7,982.33

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on line 6 of Summary
Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 96895

CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Sylvia Rhodea

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? <input checked="" type="checkbox"/> Yes Name & Address: Ottawa Impact PAC PO Box 811 Jenison MI 49438 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Printed Marketing Material</u> 5. Date Of Receipt: <u>06/03/2022</u> 6. Vendor Name & Address: Holland Litho 10972 Chicago Dr Zeeland MI, 49464	\$ <u>\$46.28</u>	\$ <u>\$5,646.71</u>
<input type="checkbox"/> Fund Raiser Contribution			
Contribution # 2 PAC Receipt? <input checked="" type="checkbox"/> Yes Name & Address: Ottawa Impact PAC PO Box 812 Jenison MI 49439 If over \$100.00 cumulative, please provide: Occupation: <u>PAC</u> Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Signs</u> 5. Date Of Receipt: <u>06/03/2022</u> 6. Vendor Name & Address: Source One Digital 3044 Glade Street Muskegon MI, 49444	\$ <u>\$948.57</u>	\$ <u>\$6,595.28</u>
<input type="checkbox"/> Fund Raiser Contribution			
Contribution #3 PAC Receipt? <input checked="" type="checkbox"/> Yes Name & Address: Ottawa Impact PAC PO Box 813 Jenison MI 49440 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Shirts</u> 5. Date Of Receipt: <u>06/10/2022</u> 6. Vendor Name & Address: Outsource Inc. 2900 Wilson Ave SW Grandville MI, 49418	\$ <u>\$36.25</u>	\$ <u>\$6,631.53</u>
<input type="checkbox"/> Fund Raiser Contribution			

Page Subtotal \$1,031.10

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule) \$7,982.33

Enter this total
on line 6 of Summary
Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 96895

CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Sylvia Rhodea

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? <input checked="" type="checkbox"/> Yes Name & Address: Ottawa Impact PAC PO Box 814 Jenison MI 49441 If over \$100.00 cumulative, please provide: Occupation: PAC Employer Name & Business Address: PAC PO Box 814 Jenison MI, 49441 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Signs</u> 5. Date Of Receipt: <u>06/24/2022</u> 6. Vendor Name & Address: Source One Digital 3044 Glade Street Muskegon MI, 49444	\$ \$1,187.37	\$ \$7,818.90
Contribution # 2 PAC Receipt? <input checked="" type="checkbox"/> Yes Name & Address: Ottawa Impact PAC PO Box 815 Jenison MI 49442 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Web Hosting</u> 5. Date Of Receipt: <u>07/06/2022</u> 6. Vendor Name & Address: For Liberty LLC 517 Baldwin Street Jenison MI, 49428	\$ \$42.87	\$ \$7,861.77
Contribution #3 PAC Receipt? <input checked="" type="checkbox"/> Yes Name & Address: Ottawa Impact PAC PO Box 816 Jenison MI 49443 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Mailers</u> 5. Date Of Receipt: <u>07/15/2022</u> 6. Vendor Name & Address: Right Strategies LLC 2153 Wealthy St SE East Grand Rapids MI, 49506	\$ \$20.56	\$ \$7,882.33

Page Subtotal \$1,250.80

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule) \$7,982.33

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on line 6 of Summary
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ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 96895

CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Sylvia Rhodea

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Sylvia Rhodea 12482 60th Ave Allendale MI 49401 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Filing Fee</u> 5. Date Of Receipt: <u>03/18/2022</u> 6. Vendor Name & Address: Ottawa County 12220 Fillmore Street West Olive MI, 49460	\$ 100.00	\$ 100.00
<input type="checkbox"/> Fund Raiser Contribution			
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description _____ 5. Date Of Receipt: _____ 6. Vendor Name & Address:	\$ _____	\$ _____
<input type="checkbox"/> Fund Raiser Contribution			
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description _____ 5. Date Of Receipt: _____ 6. Vendor Name & Address:	\$ _____	\$ _____
<input type="checkbox"/> Fund Raiser Contribution			

Page Subtotal \$100.00

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule) \$7,982.33

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on line 6 of Summary
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 96895
2. Committee Name Committee to Elect Sylvia Rhodea

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	6. Amount
Expenditure #1 Name <u>WinRed Technical Services, LLC</u> Address <u>1776 Wilson Blvd</u> <u>Arlington VA 22209</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Credit Card Processing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/25/2022</u> Date \$ <u>\$4.50</u>
Expenditure #2 Name <u>USPS</u> Address <u>6370 Lake Michigan Dr</u> <u>Allendale MI 49401</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Post Office Box</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/09/2022</u> Date \$ <u>\$78.00</u>
Expenditure #3 Name <u>WinRed Technical Services, LLC</u> Address <u>1776 Wilson Blvd</u> <u>Arlington VA 22209</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Credit Card Processing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/09/2022</u> Date \$ <u>\$3.94</u>
Expenditure #4 Name <u>WinRed Technical Services, LLC</u> Address <u>1776 Wilson Blvd</u> <u>Arlington VA 22209</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Credit Card Processing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/16/2022</u> Date \$ <u>\$10.25</u>
Expenditure #5 Name <u>Family Farm & Home</u> Address <u>6101 Lake Michigan Dr</u> <u>Allendale MI 49401</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Campaign Signs</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/31/2022</u> Date \$ <u>\$141.82</u>

Subtotal this page **\$238.51**

Grand Total of all Schedules 1B
(Complete on last page of Schedule) **\$11,325.34**

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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 96895
2. Committee Name Committee to Elect Sylvia Rhodea

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	6. Amount
Expenditure #1 Name <u>Family Farm & Home</u> Address <u>6101 Lake Michigan Dr</u> <u>Allendale MI 49401</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Campaign Signs</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/31/2022</u> Date \$ <u>\$150.29</u>
Expenditure #2 Name <u>OUTFRONT Media Inc.</u> Address <u>185 US Highway 46</u> <u>Fairfield NJ 70040</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Billboards</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/01/2022</u> Date \$ <u>\$4,826.01</u>
Expenditure #3 Name <u>Amazon</u> Address <u>440 Terry Ave N</u> <u>Seattle WA 98109</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Marketing Expense</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/02/2022</u> Date \$ <u>\$133.59</u>
Expenditure #4 Name <u>For Liberty LLC</u> Address <u>517 Baldwin Street</u> <u>Jenison MI 49428</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Campaign Signs</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/02/2022</u> Date \$ <u>\$111.97</u>
Expenditure #5 Name <u>WinRed Technical Services, LLC</u> Address <u>1776 Wilson Blvd</u> <u>Arlington VA 22209</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Credit Card Processing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/06/2022</u> Date \$ <u>\$15.61</u>
Subtotal this page		\$5,237.46
Grand Total of all Schedules 1B (Complete on last page of Schedule)		\$11,325.34

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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 96895
2. Committee Name Committee to Elect Sylvia Rhodea

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	6. Amount
Expenditure #1 Name <u>Allendale Area Chamber of Commerce</u> Address <u>11325 54th Avenue</u> <u>Allendale MI 49401</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Parade Materials</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/08/2022</u> Date \$ <u>\$75.00</u>
Expenditure #2 Name <u>Family Farm & Home</u> Address <u>6101 Lake Michigan Dr</u> <u>Allendale MI 49401</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Campaign Signs</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/08/2022</u> Date \$ <u>\$141.82</u>
Expenditure #3 Name <u>Allendale Area Chamber of Commerce</u> Address <u>11325 54th Avenue</u> <u>Allendale MI 49401</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Memberships</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/09/2022</u> Date \$ <u>\$175.00</u>
Expenditure #4 Name <u>Amazon</u> Address <u>440 Terry Ave N</u> <u>Seattle WA 98109</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Marketing Expense</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/10/2022</u> Date \$ <u>\$77.10</u>
Expenditure #5 Name <u>WinRed Technical Services, LLC</u> Address <u>1776 Wilson Blvd</u> <u>Arlington VA 22209</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Credit Card Processing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/13/2022</u> Date \$ <u>\$2.05</u>
Subtotal this page		\$470.97
Grand Total of all Schedules 1B (Complete on last page of Schedule)		\$11,325.34

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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 96895
2. Committee Name Committee to Elect Sylvia Rhodea

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	6. Amount
Expenditure #1 Name <u>USPS</u> Address 6370 Lake Michigan Dr Allendale MI 49401 <input type="checkbox"/> Fund Raiser	Purpose: <u>Post Office Box</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/16/2022</u> Date \$ <u>\$34.80</u>
Expenditure #2 Name <u>G R Central Iron & Steel Inc</u> Address 1730 Alpine Ave NW Grand Rapids MI 49504 <input type="checkbox"/> Fund Raiser	Purpose: <u>Parade Materials</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/17/2022</u> Date \$ <u>\$118.95</u>
Expenditure #3 Name <u>ProLab Express</u> Address 4317 Airwest Dr SE Kentwood MI 49512 <input type="checkbox"/> Fund Raiser	Purpose: <u>Marketing Expense</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/17/2022</u> Date \$ <u>\$50.88</u>
Expenditure #4 Name <u>WinRed Technical Services, LLC</u> Address 1776 Wilson Blvd Arlington VA 22209 <input type="checkbox"/> Fund Raiser	Purpose: <u>Credit Card Processing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/21/2022</u> Date \$ <u>\$6.94</u>
Expenditure #5 Name <u>WinRed Technical Services, LLC</u> Address 1776 Wilson Blvd Arlington VA 22209 <input type="checkbox"/> Fund Raiser	Purpose: <u>Credit Card Processing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/27/2022</u> Date \$ <u>\$10.25</u>

Subtotal this page **\$221.82**

Grand Total of all Schedules 1B
(Complete on last page of Schedule) **\$11,325.34**

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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 96895
2. Committee Name Committee to Elect Sylvia Rhodea

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	6. Amount
Expenditure #1 Name <u>Amazon</u> Address <u>440 Terry Ave N</u> <u>Seattle WA 98109</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Parade Materials</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/29/2022</u> Date \$ <u>\$63.16</u>
Expenditure #2 Name <u>Hobby Lobby</u> Address <u>555 Center Dr NW</u> <u>Walker MI 49544</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Parade Materials</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/29/2022</u> Date \$ <u>\$116.87</u>
Expenditure #3 Name <u>Amazon</u> Address <u>440 Terry Ave N</u> <u>Seattle WA 98109</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Parade Materials</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/01/2022</u> Date \$ <u>\$31.77</u>
Expenditure #4 Name <u>USPS</u> Address <u>6370 Lake Michigan Dr</u> <u>Allendale MI 49401</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Post Office Box</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/01/2022</u> Date \$ <u>\$34.80</u>
Expenditure #5 Name <u>Allendale Area Chamber of Commerce</u> Address <u>11325 54th Avenue</u> <u>Allendale MI 49401</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Advertising</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/05/2022</u> Date \$ <u>\$360.00</u>

Subtotal this page **\$606.60**
Grand Total of all Schedules 1B
(Complete on last page of Schedule) **\$11,325.34**

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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 96895
2. Committee Name Committee to Elect Sylvia Rhodea

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	6. Amount
Expenditure #1 Name <u>Family Farm & Home</u> Address 6101 Lake Michigan Dr Allendale MI 49401 <input type="checkbox"/> Fund Raiser	Purpose: <u>Campaign Signs</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/05/2022</u> Date \$ <u>\$142.88</u>
Expenditure #2 Name <u>Family Farm & Home</u> Address 6101 Lake Michigan Dr Allendale MI 49401 <input type="checkbox"/> Fund Raiser	Purpose: <u>Campaign Signs</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/05/2022</u> Date \$ <u>\$11.44</u>
Expenditure #3 Name <u>Meijer</u> Address 315 Wilson Ave SW Grand Rapids MI 49534 <input type="checkbox"/> Fund Raiser	Purpose: <u>Marketing Expense</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/05/2022</u> Date \$ <u>\$84.23</u>
Expenditure #4 Name <u>Sam's Club</u> Address 2190 N Park Dr Holland MI 49424 <input type="checkbox"/> Fund Raiser	Purpose: <u>Marketing Expense</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/05/2022</u> Date \$ <u>\$237.16</u>
Expenditure #5 Name <u>WinRed Technical Services, LLC</u> Address 1776 Wilson Blvd Arlington VA 22209 <input type="checkbox"/> Fund Raiser	Purpose: <u>Credit Card Processing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/05/2022</u> Date \$ <u>\$23.89</u>
Subtotal this page		\$499.60
Grand Total of all Schedules 1B (Complete on last page of Schedule)		\$11,325.34

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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 96895
2. Committee Name Committee to Elect Sylvia Rhodea

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	6. Amount
Expenditure #1 Name <u>Source One Digital</u> Address <u>1137 N Gateway Blvd</u> <u>Norton Shores MI 49441</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Campaign Signs</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/07/2022</u> Date \$ <u>\$544.66</u>
Expenditure #2 Name <u>Source One Digital</u> Address <u>1137 N Gateway Blvd</u> <u>Norton Shores MI 49441</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Campaign Signs</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/07/2022</u> Date \$ <u>\$1,114.21</u>
Expenditure #3 Name <u>Family Farm & Home</u> Address <u>6101 Lake Michigan Dr</u> <u>Allendale MI 49401</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Campaign Signs</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/11/2022</u> Date \$ <u>\$65.61</u>
Expenditure #4 Name <u>WinRed Technical Services, LLC</u> Address <u>1776 Wilson Blvd</u> <u>Arlington VA 22209</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Credit Card Processing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/11/2022</u> Date \$ <u>\$23.59</u>
Expenditure #5 Name <u>For Liberty LLC</u> Address <u>517 Baldwin Street</u> <u>Jenison MI 49428</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Parade Materials</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/14/2022</u> Date \$ <u>\$165.00</u>
Subtotal this page		\$1,913.12
Grand Total of all Schedules 1B (Complete on last page of Schedule)		\$11,325.34

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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 96895
2. Committee Name Committee to Elect Sylvia Rhodea

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	6. Amount
Expenditure #1 Name <u>Right Strategies, LLC</u> Address <u>2153 Wealthy St. SE</u> <u>East Grand Rapids MI 49506</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Campaign Mailers</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/15/2022</u> Date \$ <u>\$2,137.26</u>
Expenditure #2 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date \$ _____
Expenditure #3 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date \$ _____
Expenditure #4 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date \$ _____
Expenditure #5 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date \$ _____
Subtotal this page		\$2,137.26
Grand Total of all Schedules 1B (Complete on last page of Schedule)		\$11,325.34

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